PTO/SB/01A (10-01)

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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

OVENWARE FOR MICROWAVE OVEN

**Title of Invention** 

As the below named inventor(s), I/we declare that:					
This declaration is directed to:					
<ul> <li>The attached application, or</li> <li>Application No10/627939, filed onJuly 25, 2003,</li> </ul>					
as amended on(if applicable);					
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVENTOR(S)					
Inventor one: MICHAEL ROBERT SAMUEYS					
Signature: Wichaul Co bet Com Wacitizen of: US					
Inventor two: MARION G. WAGGONER \					
Signature: Citizen of:					
Inventor three:JOEL D. CITRON					
Signature: Citizen of: US					
Inventor four: ROGER MOONS					
Signature: Citizen of:					
Additional investors are being named as					

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.						
FULL NAME OF	INVENTOR(S)					
Inventor one: _	MICHAEL ROBERT SAMUELS					
Signature:	Citizen of: US					
Inventor two:	MARION G. WAGGONER					
Signature:	ture: Marin 6-len Wayforweitizen of: U.S.A.					
Inventor three:	JOEL D. CITRON					
Signature:	Citizen of: US					
Inventor four:	ROGER MOONS					
Signature:	Citizen of:					
	ntors are being named onadditional form(s) attached hereto.					

Additional inventors are being named on additional form(s) attached hereto.

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FULL NAME OF	INVENTOR(S)				
Inventor one:	MICHAEL ROBERT SAMUELS				
Signature:	Citizen of: US				
Inventor two:	MARION G. WAGGONER				
Signature:	Citizen of:				
Inventor three: VOEL D. CITRON					
Signature:	Citizen of: US				
Inventor four:	ROGER MOONS				
Signature:	Citizen of:				
Additional inver	ntors are being named on additional form(s) attached hereto.				

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

OVENWARE FOR MICROWAVE OVEN

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jeopardize the va	alidity of the application or any patent issuing thereon.				
jeopardize the va					
FULL NAME OF	INVENTOR(S)				
FULL NAME OF	INVENTOR(S)  MICHAEL ROBERT SAMUELS				
FULL NAME OF Inventor one: Signature:	INVENTOR(S)  MICHAEL ROBERT SAMUELS  Citizen of: US				
FULL NAME OF Inventor one: Signature: Inventor two:	INVENTOR(S)  MICHAEL ROBERT SAMUELS  Citizen of: US  MARION G. WAGGONER				
FULL NAME OF Inventor one: Signature: Inventor two: Signature:	INVENTOR(S)  MICHAEL ROBERT SAMUELS  Citizen of: US  MARION G. WAGGONER  Citizen of:				
FULL NAME OF Inventor one: Signature: Inventor two: Signature: Inventor three:	INVENTOR(S)  MICHAEL ROBERT SAMUELS  Citizen of: US  MARION G. WAGGONER  Citizen of:  JOEL D. CITRON				
FULL NAME OF Inventor one: Signature: Inventor two: Signature: Inventor three: Signature:	INVENTOR(S)   MICHAEL ROBERT SAMUELS   Citizen of:   MARION G. WAGGONER   Citizen of:    JOEL D. CITRON   Citizen of:				

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FULL NAME OF	INVENTOR(S)						
Inventor one:	MICHAEL ROBERT SAMUELS						
Signature:	Citizen of: US						
Inventor two:	MARION G. WAGGONER						
Signature:	Citizen of:						
Inventor three:	JOEL D. CITRON						
Signature:	Citizen of: US						
Inventor four: _	ROGER MOONS						
Signature:	Citizen of:						
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FULL NAME OF INVENTOR(S)				
Inventor five Signature	CHARLES J. MOLNAR  City of: US			
Inventor six				
Signature	Citizen of:			
Inventor seven				
Signature	Citizen of:			
Inventor eight				
Signature	Citizen of:			
Inventor nine				
Signature	Citizen of:			
Inventor ten				
Signature	Citizen of:			
Inventor eleven				
Signature	Citizen of:			
Inventor twelve				
Signature	Citizen of:			
Inventor thirteen				
Signature	Citizen of:			
Inventor fourteen				
Signature	Citizen of:			
Inventor fifteen				
Signature	Citizen of:			

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**POWER OF ATTORNEY** and CORRESPONDENCE ADDRESS **INDICATION FORM** 

the Paperwork Reduction Act of 1995, no person	s are required to respond to	o a collection of information unless it displays a valid OMB control	number.
	Application Number	10/627939	
WED OF ATTORNEY	Filing Date	July 25, 2003	
WER OF ATTORNEY	First Named Invento	or Michael Robert Samu Is Et. Al.	
and ESPONDENCE ADDRESS INDICATION FORM		FOR MICROWAVE OVEN	
	Art Unit   3742	Examiner Name Unknown	
	Attorney Docket Nur	mber AD6900 US NA	

I hereby appoint:			<del></del>	
Practitioners at Customer Number:	2390	6		
OR	L			
Practitioner(s) named below:				
			B. C. C. N	
Name			Registration Number	
as my/our attorney(s) or agent(s) to prosec Trademark Office connected therewith.	cute the application identified a	above, and to tran	sact all business in the United States Patent and	
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Please recognize or change the correspon	delice address for the above-	identifica applicati	ion to.	
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	·			
I am the:				
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Name Michael Robert Samuels	(	1		
	hast Pila	<i>V</i>		
Signature //// Signature	THAY MANNE		Telephone (382) 368-9492	
- Haller -				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
*Total of forms are submitted.				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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#### THE DEWA **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS INDICATION FORM**

Appl	lication Number	10/627939
	g Date	July 25, 2003
First	t Named Invento	Michael Robert Samuels Et. Al.
	OVENWARE F	OR MICROWAVE OVEN
Title		
Art l	Jnit   3742	Examiner Name
0.44	mey Docket Nun	ber AD6900 US NA

I hereby appoint:				
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Practitioners at Customer Number:	23906		·	
OR			J	
Practitioner(s) named below:				
Name			Registration Nu	ımber
		<u> </u>		
as my/our attorney(s) or agent(s) to prosecu Trademark Office connected therewith.	ite the application identified above	e, and to trans	act all business in	the United States Patent and
Please recognize or change the correspond	ence address for the above-ident	ified application	on to:	
The above-mentioned Customer N				
OR		<u></u>		
The address associated with Cust	omer Number:			
OR Firm or				
Individual Name				
Address				
Address		State		Zip
City		State		
Telephone		Fax		
I am the:				
Applicant/Inventor.				
Assignee of record of the entire in Statement under 37 CFR 3.73(b) in	terest. See 37 CFR 3.71. is enclosed. (Form PTO/SB/96)			
	SIGNATURE of Applicant or	Assignee of F	Record	
Name Marion Glen Waggoner				
Signature Marian Gl	en Waggeru	/	1	
Date Oct. 8, 2003 Telephone 302-695-3525				
NOTE: Signatures of all the inventors or assigned forms if more than one signature is required, see	is of record of the entire interest or the below.	ir representative	e(s) are required. Sub	omit multiple
*Total of forms are s	ubmitted.			

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**POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS** 

**INDICATION FORM** 

THE TRADE WAS

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	Art Unit   3742	Examiner Name
	Attorney Docket Num	ber AD6900 US NA

Practitioners at Customer Number:  OR  Practitioner(s) named below:  Name  Registration Number  Registration Number  Name  Name  Registration Number  Name  Name  Name  Registration Number  Name  National of Era 373(b) is enclosed. (Form PTO/SB/Bg)  Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms are submitted.	I hereby appoint:					
Practitioner(s) named below:    Name	✓ Practitioners at Customer Number:	2390	06			
Name Registration Number  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number:  OR  The address associated with Customer Number:  OR  Address  City  Country  Telephone  Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Name  Powerfattoner Correct  Signature  Oate  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	OR					
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Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number:  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  Address  City  Country  Telephone  Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Name  Power of attom by Critical Country  Date  NOTE: Signature Date  NOTE: Signature signature is required, see below.	as my/our attorney(s) or agent(s) to prosecu	te the application identified	above and to trans	act all business in the United States Patent and		
The above-mentioned Customer Number:  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  Address  Address  City  Country  Telephone  Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Name  Powerfattomer Circum  Signature  Date  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below'.		to the application for times	abovo, and to trans-			
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#### **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number	10/627939	
Filing Date	July 25, 2003	
First Named Inventor	Michael Robert Samu Is Et. Al.	
OVENWARE F	FOR MICROWAVE OVEN	
Title		
Art Unit 3742	Examiner Name	
Attorney Docket Nur	nber LAD6900 US NA	

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SIGNATURE of Applicant or Assignee of Record								
Name Roger Moons	)							
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Date 06 06t 2003 Telephone +32 15 317739								
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<b>Application Number</b>	10/627939
Filing Date	July 25, 2003
First Named Invento	Michael Robert Samuels Et. Al.
OVENWARE F	OR MICROWAVE OVEN
Title	
Art Unit 3742	Examiner Name
Attorney Docket Num	ber AD6900 US NA

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City		State		Zip				
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I am the:	<u>.</u>							
Applicant/Inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Name Charles J. Molnar	22/							
Signature Ca Cel///olar								
Date 9-25-03		_	Telephone 3	302-695-1140				
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